Case 16-19720 Doc 1 Filed 06/16/16 Entered 06/16/16 09:59:43 Desc Main Document Page 1 of 56

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS	_	
Case number (if known)	_ Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on	Cathryn	
	your government-issued picture identification (for	First name	First name
	example, your driver's	A.	
	license or passport).	Middle name	Middle name
	Bring your picture	Johnson	
	identification to your meeting with the trustee.	Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years		
	Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-4557	

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Debtor 1 Cathryn A. Johnson

6/16/16 9:38A Case number (if known)

About Debtor 1:		About Debtor 2 (Spouse Only in a Joint Case):
Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	■ I have not used any business name or EINs. Business name(s)	☐ I have not used any business name or EINs. Business name(s)
	EINs	EINs
Where you live	1663 Station Park Dr.	If Debtor 2 lives at a different address:
	Grayslake, IL 60030 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
	Lake	County
	If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	County If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
	Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6. Why you are choosing this district to file for bankruptcy Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. □ I have another reason. Explain. (See 28 U.S.C. § 1408.)		Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)
	Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names Where you live Why you are choosing this district to file for	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names Business name(s) EINs Where you live 1663 Station Park Dr. Grayslake, IL 60030 Number, Street, City, State & ZIP Code Lake County If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. Why you are choosing this district to file for bankruptcy Why you are choosing this district to file for bankruptcy I have another reason.

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Case number (if known) Debtor 1 Cathryn A. Johnson Part 2: Tell the Court About Your Bankruptcy Case Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy The chapter of the Bankruptcy Code you are (Form 2010)). Also, go to the top of page 1 and check the appropriate box. choosing to file under Chapter 7 ☐ Chapter 11 ☐ Chapter 12 ☐ Chapter 13 How you will pay the fee I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. Have you filed for No. bankruptcy within the last 8 years? ☐ Yes. District When Case number When District Case number When District Case number 10. Are any bankruptcy ■ No cases pending or being filed by a spouse who is ☐ Yes. not filing this case with you, or by a business partner, or by an affiliate? Debtor Relationship to you When Case number, if known District Debtor Relationship to you When District Case number, if known 11. Do you rent your Go to line 12. No. residence? Has your landlord obtained an eviction judgment against you and do you want to stay in your residence? ☐ Yes. No. Go to line 12. Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it with this bankruptcy petition.

Document Cathryn A. Johnson

Debtor 1

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Case number (if known)

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Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor of any full- or part-time No. Go to Part 4. business? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of Bankruptcy Code and are operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure you a small business in 11 U.S.C. 1116(1)(B). debtor? I am not filing under Chapter 11. No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy □ No. U.S.C. § 101(51D). I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. ☐ Yes. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have any ■ No. property that poses or is alleged to pose a threat ☐ Yes. of imminent and What is the hazard? identifiable hazard to public health or safety? Or do you own any If immediate attention is property that needs immediate attention? needed, why is it needed? For example, do you own perishable goods, or livestock that must be fed, Where is the property? or a building that needs urgent repairs? Number, Street, City, State & Zip Code

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Debtor 1 Cathryn A. Johnson

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

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Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Document Page 6 of 56 Case number (if known) Debtor 1 Cathryn A. Johnson Part 6: **Answer These Questions for Reporting Purposes** 16. What kind of debts do 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." you have? ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ☐ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. ☐ No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses ■ No are paid that funds will be available for ☐ Yes distribution to unsecured creditors? 18. How many Creditors do 1-49 **1**,000-5,000 **1** 25,001-50,000 you estimate that you **5001-10,000 5**0,001-100,000 **50-99** owe? **1**0,001-25,000 ☐ More than 100,000 **1**00-199 **200-999** How much do you **\$0 - \$50,000** □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your assets to □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500.001 - \$1 million 20. How much do you □ \$0 - \$50,000 □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your liabilities □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion to be? **\$100,001 - \$500,000** □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,000,001 - \$500 million ■ More than \$50 billion □ \$500,001 - \$1 million Sign Below Part 7: For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11. United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Cathryn A. Johnson Signature of Debtor 2 Cathryn A. Johnson Signature of Debtor 1 Executed on June 16, 2016 Executed on

MM / DD / YYYY

MM / DD / YYYY

Debtor 1 Cathryn A. Johnson

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For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ David M. Siegel	Date	June 16, 2016
Signature of Attorney for Debtor		MM / DD / YYYY
David M. Siegel Printed name		
David M. Siegel & Associates Firm name		
790 Chaddick Drive Wheeling, IL 60090		
Number, Street, City, State & ZIP Code		
Contact phone (847) 520-8100	Email address	
#06207611		
Bar number & State		

Page 8 of 56 Document Fill in this information to identify your case: Debtor 1 Cathryn A. Johnson First Name Middle Name Last Name Debtor 2 First Name Middle Name Last Name (Spouse if, filing) NORTHERN DISTRICT OF ILLINOIS

> ☐ Check if this is an amended filing

Official Form 106Sum

United States Bankruptcy Court for the:

Case number (if known)

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page

		Your a	assets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	157,500.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	92,201.0
	1c. Copy line 63, Total of all property on Schedule A/B	\$	249,701.0
Par	t 2: Summarize Your Liabilities		
			iabilities nt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	162,132.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	1,979.6
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	60,688.00
	Your total liabilities	\$	224,799.65
Par	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	3,464.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	3,464.00
Par	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ır other sc	hedules.
	■ Yes		

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

page 1 of 2

the court with your other schedules.

Debtor 1 Cathryn A. Johnson Document Page 9 of 56 Case number (if known)

8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/F, copy the following:	Total c	laim
From Fart 4 on Schedule E/F, copy the following.		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	1,979.65
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	32,647.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	34,626.65

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FIII	in this inf	ormation to identify	your case and th						
Deb	otor 1	Cathryn A. J		e Name		Last Name			
	otor 2 ouse, if filing)	First Name	Middle	e Name		Last Name			
Uni	ted States	Bankruptcy Court for	the: NORTHER	N DISTR	ICT OF ILLIN	NOIS			
Cas	se number					-			Check if this is an amended filing
)f	ficial F	orm 106A/E	3						
Sc	chedi	ıle A/B: Pı	roperty						12/15
nfor	mation. If r wer every q	nore space is needed, uestion.	attach a separate sl	heet to thi	s form. On the	e are filing together, both are ed e top of any additional pages, v rn or Have an Interest In			
D	o vou own	or have any legal or eq	uitable interest in a	nv reside	nce. building.	land, or similar property?			
_	_		,	,	,	iana, er emma property.			
	No. Go to	re is the property?							
_	• res. whie	e is the property?							
1.1				What i	s the property	? Check all that apply			
		ation Park Dr.	- de tien		Single-family h	nome			or exemptions. Put
	Street addr	ess, if available, or other des	cription		Duplex or mult	-			aims on <i>Schedule D:</i> Secured by Property.
					Condominium	or cooperative			
	Graysla	ke IL	60030-0000		Manufactured Land	or mobile home	Current value of entire property?		urrent value of the ortion you own?
	City	State	ZIP Code		Investment pro	pperty	\$157,50	•	\$157,500.00
					Timeshare		Describe the not	ture of vour	ownership interest
					Other Tov	wnhome	(such as fee sim	ple, tenanc	ownership interest y by the entireties, or
				_		in the property? Check one	a life estate), if k Fee simple	mown.	
	Lake				Debtor 1 only	-	ree siiiipie		
	County				Debtor 2 only Debtor 1 and E	Dahtar O anly			
						the debtors and another	Check if this		nity property
						ou wish to add about this item,	`	10)	
					ty identification				

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for

pages you have attached for Part 1. Write that number here......

Official Form 106A/B Schedule A/B: Property page 1

Part 2: Describe Your Vehicles

\$157,500.00

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Case number (if known) Document Debtor 1 Cathryn A. Johnson 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles ☐ No Yes Do not deduct secured claims or exemptions. Put Mini Make: Who has an interest in the property? Check one the amount of any secured claims on Schedule D: **Cooper Convertible** Creditors Who Have Claims Secured by Property. Model: ■ Debtor 1 only 2011 Year: Debtor 2 only Current value of the Current value of the Approximate mileage: Debtor 1 and Debtor 2 only entire property? portion you own? Other information: At least one of the debtors and another Ally Financial \$13,150.00 \$13,150.00 Secured Lien \$12,000 ☐ Check if this is community property (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories ■ No ☐ Yes 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for \$13,150.00 pages you have attached for Part 2. Write that number here..... Part 3: Describe Your Personal and Household Items Do you own or have any legal or equitable interest in any of the following items? Current value of the portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware □ No Yes. Describe..... **Household Goods and Furniture** \$350.00 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games ☐ No Yes. Describe..... TV & Electronics \$150.00 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles No ☐ Yes. Describe..... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ■ No ☐ Yes. Describe..... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment

Nο

Debtor 1	Case 16-19720		Filed 06/16/16 Document	Entered 06/16/16 09:59:43 Page 12 of 56 Case number (if know	6/16/16 9:38AN
_	Cathryn A. Johnson	11			
11. Clothe Examp	Secribe Secribe: Everyday clothes, full Describe	rs, leather coats	, designer wear, shoes	, accessories	
	Norm	al Apparel			\$800.00
■ No □ Yes. 13. Non-fa Examp			engagement rings, wed	ding rings, heirloom jewelry, watches, gems	s, gold, silver
	1, Dog	α			\$50.00
for Pa	the dollar value of all of art 3. Write that number scribe Your Financial Asse	here		ny entries for pages you have attached	\$1,350.00
	vn or have any legal or e		st in any of the follow	ving?	Current value of the portion you own? Do not deduct secured claims or exemptions.
■ No	oles: Money you have in y	•		osit box, and on hand when you file your pe	tition
Examp			accounts; certificates of counts with the same insulation in the country of the c		le houses, and other similar
	17.1.	Checking A	ccount Chase Ba	ank	\$150.00
	17.2.	Savings Ac	count Chase Ba	ank	\$25.00
			Chase Ba	ank	
	17.3.	CD Accoun	t 30 Days (CD	\$1,000.00
			Chase Ba	ank	
	17.4.	CD Accoun	t 60 days (CD	\$1,000.00

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Case number (if known) 6/16/16 9:38AM Document Debtor 1 Cathryn A. Johnson **Chase Bank** \$1,000.00 17.5. CD Account 90 days CD Account 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ■ No ☐ Yes..... Institution or issuer name: 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture ■ No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ■ No ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans \square No Yes. List each account separately. Type of account: Institution name: **Cook County Pension ERISA Qualified** \$25,000.00

403(b) **ERISA Qualified** \$39.000.00

ERISA Qualified Pension \$10,526.00

22. Security deposits and prepayments

Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others

■ No Institution name or individual: ☐ Yes.

23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years)

■ No Issuer name and description. ☐ Yes.....

24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.

26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

No

☐ Yes..... Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c):

25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit

No

☐ Yes. Give specific information about them...

26. Patents, copyrights, trademarks, trade secrets, and other intellectual property

Examples: Internet domain names, websites, proceeds from royalties and licensing agreements

No

☐ Yes. Give specific information about them...

27. Licenses, franchises, and other general intangibles

Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses

No

Debtor 1	Case 16-19720 Cathryn A. Johnson	Doc 1	Filed 06/16/16 Document	Entered 06/16/16 09:59:43 Page 14 of 56 Case number (if known)	Desc Main	6/16/16 9:38AN
☐ Yes.	Give specific information al	bout them				
	property owed to you?				Current valu portion you Do not deduc claims or exe	own? at secured
■ No	rfunds owed to you Give specific information ab	oout them, inc	cluding whether you alre	ady filed the returns and the tax years		
■ No			usal support, child supp	ort, maintenance, divorce settlement, property	y settlement	
Exam _i ■ No	amounts someone owes y uples: Unpaid wages, disabilit benefits; unpaid loans Give specific information	ty insurance p		efits, sick pay, vacation pay, workers' compe	ensation, Social Sec	urity
	sts in insurance policies ples: Health, disability, or life	e insurance; h	nealth savings account (HSA); credit, homeowner's, or renter's insura	ince	
■ Yes.	. Name the insurance compa Comp	nny of each popany name:	olicy and list its value.	Beneficiary:	Surrender o	r refund
		, ,			value:	
		•	Policies Term Only			\$0.00
If you somed ■ No □ Yes.	nterest in property that is deare the beneficiary of a living one has died. Give specific information	Insurance th Benefit Course you from g trust, expec	someone who has die t proceeds from a life in	ed surance policy, or are currently entitled to rec	value:	\$0.00
If you somed ■ No □ Yes. 33. Claims Examp ■ No	nterest in property that is deare the beneficiary of a living one has died. Give specific information	Insurance th Benefit Coue you from g trust, expected the country of the country o	someone who has die t proceeds from a life in	ed surance policy, or are currently entitled to rec	value:	\$0.00
If you somed No □ Yes. 33. Claims Examp No □ Yes. 34. Other No	nterest in property that is do are the beneficiary of a living one has died. Give specific information So against third parties, when the ples: Accidents, employments. Describe each claim	Insurance th Benefit Coue you from g trust, expectether or not yet disputes, insurance	someone who has die t proceeds from a life in you have filed a lawsu surance claims, or rights	ed surance policy, or are currently entitled to rec	value:	\$0.00
If you somed No	nterest in property that is do are the beneficiary of a living one has died. Give specific information s against third parties, when the ples: Accidents, employment. Describe each claim	Insurance th Benefit Coue you from g trust, expectether or not yet disputes, insued claims of	someone who has die t proceeds from a life in you have filed a lawsu surance claims, or rights	ed surance policy, or are currently entitled to rec	value:	\$0.00
If you somed No Yes. 33. Claims Exam, No Yes. 34. Other No Yes. 35. Any fit No Yes.	nterest in property that is do are the beneficiary of a living one has died. Give specific information So against third parties, when the ples: Accidents, employment and unliquidated. Describe each claim Contingent and unliquidated. Describe each claim nancial assets you did not the dollar value of all of you	Insurance th Benefit Coue you from g trust, expected there or not yet disputes, insurance already list	someone who has die the proceeds from a life in you have filed a lawsusurance claims, or rights every nature, including a	ed surance policy, or are currently entitled to rec	value:	\$0.00
If you somed No	nterest in property that is do are the beneficiary of a living one has died. Give specific information Sagainst third parties, when the ples: Accidents, employment. Describe each claim contingent and unliquidate. Describe each claim nancial assets you did not. Give specific information the dollar value of all of your art 4. Write that number here.	Insurance th Benefit Coue you from g trust, expectether or not yet disputes, insured claims of already list	someone who has die the proceeds from a life in you have filed a lawsusurance claims, or rights every nature, including a	ed surance policy, or are currently entitled to rec it or made a demand for payment is to sue g counterclaims of the debtor and rights to	value:	\$0.00 use

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Case number (if known) Document Debtor 1 Cathryn A. Johnson Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ☐ Yes. Give specific information....... \$0.00

54. Add the dollar value of all of your entries from Part 7. Write that number here List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 \$157,500.00 Part 2: Total vehicles, line 5 \$13,150.00 57. Part 3: Total personal and household items, line 15 \$1,350.00 Part 4: Total financial assets, line 36 \$77,701.00 Part 5: Total business-related property, line 45 \$0.00 Part 6: Total farm- and fishing-related property, line 52 \$0.00 Part 7: Total other property not listed, line 54 \$0.00 Total personal property. Add lines 56 through 61... \$92,201.00 Copy personal property total \$92,201.00

Official Form 106A/B Schedule A/B: Property page 6

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$249,701.00

		Documer	nt Page 16 of 56	0/10/10 0.00/ III
Fill in this infor	mation to identify your	case:		
Debtor 1	Cathryn A. Johns	son		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number (if known)				Check if this is an amended filing
-				 amended ming

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Proper	y You Claim as Exempt
-----------------------------	-----------------------

1.	Which set of exemptions are	you claiming?	Check one only.	even if your s	pouse is filing	with yo	эu

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim Check only one box for each exemption.		Specific laws that allow exemption
		Copy the value from Schedule A/B			
	1663 Station Park Dr. Grayslake, IL 60030 Lake County	\$157,500.00 ■		\$15,000.00	735 ILCS 5/12-901
	Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit	
	2011 Mini Cooper Convertible Ally Financial	\$13,150.00		\$2,400.00	735 ILCS 5/12-1001(c)
	Secured Lien \$12,000 Line from Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit	
	Household Goods and Furniture Line from Schedule A/B: 6.1	\$350.00		\$350.00	735 ILCS 5/12-1001(b)
	Line nom Schedule A.B. G. 1			100% of fair market value, up to any applicable statutory limit	
	TV & Electronics Line from Schedule A/B: 7.1	\$150.00		\$150.00	735 ILCS 5/12-1001(b)
	Line from Genedate A.E.			100% of fair market value, up to any applicable statutory limit	
	Normal Apparel Line from Schedule A/B: 11.1	\$800.00		\$800.00	735 ILCS 5/12-1001(a)
	Life from Goriedaic 7/D. 1111			100% of fair market value, up to any applicable statutory limit	

Document Page 17 of 56
Case number (if known)

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim		Specific laws that allow exemption	
	Copy the value from Schedule A/B	Che	ck only one box for each exemption.		
1, Dog Line from Schedule A/B: 13.1	\$50.00		\$50.00	735 ILCS 5/12-1001(b)	
			100% of fair market value, up to any applicable statutory limit		
Checking Account: Chase Bank Line from Schedule A/B: 17.1	\$150.00		\$150.00	735 ILCS 5/12-1001(b)	
Zino nom Goricadio / (Zi. 1111)			100% of fair market value, up to any applicable statutory limit		
Savings Account: Chase Bank Line from Schedule A/B: 17.2	\$25.00		\$25.00	735 ILCS 5/12-1001(b)	
Elite Hoth Governor V.B. 1112			100% of fair market value, up to any applicable statutory limit		
CD Account: Chase Bank	\$1,000.00		\$1,000.00	735 ILCS 5/12-1001(b)	
30 Days CD Line from Schedule A/B: 17.3			100% of fair market value, up to any applicable statutory limit		
CD Account: Chase Bank	\$1,000.00		\$1,000.00	735 ILCS 5/12-1001(b)	
60 days CD Line from <i>Schedule A/B</i> : 17.4			100% of fair market value, up to any applicable statutory limit		
CD Account: Chase Bank	\$1,000.00		\$1,000.00	735 ILCS 5/12-1001(b)	
90 days CD Account Line from <i>Schedule A/B</i> : 17.5			100% of fair market value, up to any applicable statutory limit		
Cook County Pension: ERISA Qualified	\$25,000.00		\$25,000.00	735 ILCS 5/12-1006	
Line from Schedule A/B: 21.1			100% of fair market value, up to any applicable statutory limit		
403(b): ERISA Qualified Line from Schedule A/B: 21.2	\$39,000.00		\$39,000.00	735 ILCS 5/12-1006	
Line Horr Schedule A/B. 21.2			100% of fair market value, up to any applicable statutory limit		
Pension: ERISA Qualified Line from Schedule A/B: 21.3	\$10,526.00		\$10,526.00	735 ILCS 5/12-1006	
Line Hotti Schedule Arb. 21.3			100% of fair market value, up to any applicable statutory limit		
Life Insurance Policies Term Death Benefit Only	\$0.00		\$0.00	215 ILCS 5/238	
Line from Schedule A/B: 31.1			100% of fair market value, up to any applicable statutory limit		
Are you claiming a homestead exemption (Subject to adjustment on 4/01/19 and every ■ No □ Yes. Did you acquire the property cover □ No	3 years after that for ca	ises fi			

Debtor 1 Cathryn A. Johnson

	0436 10 13720	Document Document	Page 18	of 56		6/16/16 9:38AI
Fill in this inf	ormation to identify you	ır case:				
Debtor 1	Cathryn A. Johr	nson				
	First Name	Middle Name	Last Name			
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name			
	Danilar antoni Carretta ethan	NODTHEDN DISTRICT OF HIL	INOIC			
United States	Bankruptcy Court for the:	NORTHERN DISTRICT OF ILL	INOIS			
Case number (if known)						if this is an ed filing
○ 46: -: - 1	400D					
Official Fo			_			
Schedul	e D: Creditors	Who Have Claims	Secured	by Property	У	12/15
	the Additional Page, fill it o	If two married people are filing togethout, number the entries, and attach it t				
. Do any credit	ors have claims secured by	y your property?				
☐ No. Ch	eck this box and submit the	his form to the court with your other	schedules. You	have nothing else to	o report on this form.	
Yes. Fi	II in all of the information	below.				
Part 1: Lis	t All Secured Claims					
for each claim.	If more than one creditor has	more than one secured claim, list the cred is a particular claim, list the other creditors cal order according to the creditor's name	s in Part 2. As	Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
2.1 Ally Fir		Describe the property that secures t		\$12,000.00	\$13,150.00	\$0.00
PO Box	x 380901 ington, MN 55438	2011 Mini Cooper Convertible Ally Financial Secured Lien \$12,000 As of the date you file, the claim is: (apply. Contingent				
	treet, City, State & Zip Code	☐ Unliquidated				
		☐ Disputed				
_	e debt? Check one.	Nature of lien. Check all that apply.				
Debtor 1 onl	•		nortgage or secui	red		
☐ Debtor 2 onl☐ Debtor 1 and	•	☐ Statutory lien (such as tax lien, med	chanic's lian)			
	of the debtors and another	☐ Judgment lien from a lawsuit	chariles lien)			
	s claim relates to a		Purchase Mo	oney Security		
Date debt was	incurred 6/16	Last 4 digits of account numb	per 2212			
2.2 Guara r	nteed Rate/dovenm	Describe the property that secures t	he claim:	\$150,132.00	\$157,500.00	\$0.00
Creditor's N		1663 Station Park Dr. Graysl 60030 Lake County		V 100,102.00	<u> </u>	
1 Corp	orate Dr., Ste. 360	As of the date you file, the claim is: (apply.	Check all that			
Lake Z	urich, IL 60047	Contingent				
Number, St	treet, City, State & Zip Code	■ Unliquidated				
Who owes the	e debt? Check one.	☐ Disputed Nature of lien. Check all that apply.				
■ Debtor 1 onl		☐ An agreement you made (such as r	mortgage or secui	red		
Debtor 2 onl	•	car loan)				
Debtor 1 and	=	☐ Statutory lien (such as tax lien, med	chanic's lien)			
☐ At least one	of the debtors and another	☐ Judgment lien from a lawsuit				

 \square Check if this claim relates to a

community debt

■ Other (including a right to offset)

Mortgage Balance

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Debtor 1 Cathryn A. Johnson			Case nu	mber (if know)	
	First Name	Middle Name	Last Name		
		Opened 6/01/15			
		Last Active			
Date d	ebt was incurred	4/04/16	Last 4 digits of account number	2097	
		•	n A on this page. Write that number h	iere:	\$162,132.00
	s is the last page e that number her		ollar value totals from all pages.		\$162,132.00
Part 2	List Others t	o Be Notified for a D	ebt That You Already Listed		
trying than o	to collect from yo ne creditor for an	u for a debt you owe to	someone else, list the creditor in Paristed in Part 1, list the additional cred	rt 1, and then list th	isted in Part 1. For example, if a collection agency is ne collection agency here. Similarly, if you have more lo not have additional persons to be notified for any
	Name, Number, St Ally Financial	treet, City, State & Zip Co	de	On which line in F	Part 1 did you enter the creditor? _2.1_
		24	de		Part 1 did you enter the creditor?ccount number
	Ally Financial PO Box 13042 Roseville, MN	24 I 55113-0004 treet, City, State & Zip Co		Last 4 digits of ac	,

Page 20 of 56 Document Fill in this information to identify your case: Debtor 1 Cathryn A. Johnson Middle Name Last Name First Name Debtor 2 (Spouse if, filing) First Name Middle Name Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number (if known) ☐ Check if this is an amended filing Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and case number (if known). Part 1: List All of Your PRIORITY Unsecured Claims Do any creditors have priority unsecured claims against you? ☐ No. Go to Part 2. 2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) **Total claim Priority** Nonpriority amount 2.1 **Internal Revenue Service** \$1,979.65 \$1,979.65 \$0.00 Last 4 digits of account number Priority Creditor's Name Centralized Insolvency When was the debt incurred? 2013 Operations P.O. Box 7346 Philadelphia, PA 19114-7346 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent Debtor 1 only ■ Unliquidated Debtor 2 only □ Disputed Type of PRIORITY unsecured claim: Debtor 1 and Debtor 2 only ■ Domestic support obligations \square At least one of the debtors and another Taxes and certain other debts you owe the government ☐ Check if this claim is for a community debt Is the claim subject to offset? ☐ Claims for death or personal injury while you were intoxicated ■ No ☐ Other. Specify ☐ Yes **Federal Taxes Owed** Part 2: List All of Your NONPRIORITY Unsecured Claims 3. Do any creditors have nonpriority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules. Yes. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more

Total claim

Part 2.

than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than three nonpriority unsecured claims fill out the Continuation Page of

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Case number (if know)

Debtor	1 Cathryn A. Johnson		Case number (if know)			
4.1	Auto Club Insurance Association Nonpriority Creditor's Name	Last 4 digits of account number	0148	\$515.00		
	1 Auto Club Drive	When was the debt incurred?	2/16 - 5/15			
	Dearborn, MI 48126 Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply			
	Who incurred the debt? Check one. Debtor 1 only					
		☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured	l alaim.			
	At least one of the debtors and another	Student loans	i Claiiii.			
	☐ Check if this claim is for a community debt Is the claim subject to offset? ■ No		ration agreement or divorce that you did not			
		Debts to pension or profit-sharin	a plane, and other similar debts			
	□ Yes	Other. Specify Services	g plans, and other similar debts			
4.2	Barclays Bank Delaware Nonpriority Creditor's Name	Last 4 digits of account number	7013	\$10,370.00		
	125 S. West St. Wilmington, DE 19801	When was the debt incurred?	Opened 4/01/12 Last Active 4/19/16			
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i				
	■ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed				
	At least one of the debtors and another	Type of NONPRIORITY unsecured				
	Check if this claim is for a community	Student loans				
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims				
	No	☐ Debts to pension or profit-sharin				
	Yes	Other. Specify Collections				
4.3	Chase Card	Last 4 digits of account number	5426	\$1,479.00		
	Po Box 15298 Wilmington, DE 19850	When was the debt incurred?	Opened 8/01/15 Last Active 4/17/16			
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply			
	■ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured ☐ Student loans	d claim:			
	☐ Check if this claim is for a community					
	debt Is the claim subject to offset?	ration agreement or divorce that you did not				
	■ No	☐ Debts to pension or profit-sharin				
	Yes	■ Other. Specify Purchases				

Document

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4.4	Citi	Last 4 digits of account number		\$478.00
	Nonpriority Creditor's Name Attn: Bankruptcy Department PO Box 6241	When was the debt incurred?		
	Sioux Falls, SD 57717 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim		
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Collections	<u> </u>	
4.5	Dept Of Ed/navient Nonpriority Creditor's Name	Last 4 digits of account number	0913	\$14,891.00
	Po Box 9635 Wilkes Barre, PA 18773	When was the debt incurred?	Opened 9/01/13 Last Active 3/31/16	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured		
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset? —	report as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify		
		Student Lo	an	
4.6	Dept Of Ed/navient Nonpriority Creditor's Name	Last 4 digits of account number	0519	\$14,302.00
	Po Box 9635 Wilkes Barre, PA 18773	When was the debt incurred?	Opened 5/01/14 Last Active 3/31/16	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharin	g plans, and other similar debts	
	☐ Yes	Other. Specify	51 , 	
	□ res	Student Lo	an	

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Debtor 1 Cathryn A. Johnson

4.7	Dept Of Ed/navient	Last 4 digits of account number	0926	\$3,454.00
	Nonpriority Creditor's Name Po Box 9635 Wilkes Barre, PA 18773	When was the debt incurred?	Opened 9/01/13 Last Active 3/31/16	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐Yes	☐ Other. Specify		
		Student Lo	an	
4.8	Discover Fin Svcs LLC	Last 4 digits of account number	3984	\$12,270.00
	Nonpriority Creditor's Name Po Box 15316 Wilmington, DE 19850	When was the debt incurred?	Opened 7/01/10 Last Active 4/17/16	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	No	Debts to pension or profit-sharin	ng plans, and other similar debts	
	Yes	Other. Specify Purchases	g plants, and called community	
4.9	GECRB/Paypal	Last 4 digits of account number		\$500.00
	Nonpriority Creditor's Name PO Box 981439 EL Box TV 70008 1420	When was the debt incurred?		
	El Paso, TX 79998-1439 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	■ Other. Specify Collections	3	

Document

Page 24 of 56 Case number (if know)

Debto	Cathryn A. Johnson	Case number (if know)			
4.1	IL Bone and Joint Institute	Last 4 digits of account number	\$83.00		
	Nonpriority Creditor's Name 5057 Paysphere Circle Chicago II, 60674	When was the debt incurred?	· · · · · · · · · · · · · · · · · · ·		
	Chicago, IL 60674 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply			
	■ Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts			
	□ Yes	■ Other. Specify Medical			
4.1	Lake Zurich Police Phot				
1	Enforcement	Last 4 digits of account number 3067	\$200.00		
	Nonpriority Creditor's Name 200 Mohawk Trail Lake Zurich, IL 60047	When was the debt incurred? 2015 - 2016			
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply			
	Who incurred the debt? Check one.				
	Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
	☐ Check if this claim is for a community	☐ Student loans			
	debt	\square Obligations arising out of a separation agreement or divorce that you did not			
	Is the claim subject to offset?	report as priority claims			
	No	☐ Debts to pension or profit-sharing plans, and other similar debts			
	Yes	Other. Specify Tickets			
4.1	Libertyville Sports Complex	Last 4 digits of account number	\$365.00		
	Nonpriority Creditor's Name 1950 N Highway 45	When was the debt incurred?			
	Libertyville, IL 60048 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply			
	Who incurred the debt? Check one.	The or the date year may the statuted or sook an anatoppy			
	■ Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	1 and Debtor 2 only			
	☐ At least one of the debtors and another				
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
	No	Debts to pension or profit-sharing plans, and other similar debts			
	☐ Yes	■ Other. Specify Purchases			

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4.1 3	Northwest Community Healthcare	Last 4 digits of account number	3489	\$565.00
	Nonpriority Creditor's Name 28079 Network Place	When was the debt incurred?	4/16	
	Chicago, IL 60673-1280 Number Street City State Zlp Code	As of the date you file, the claim	in Charle all that apply	
	Who incurred the debt? Check one.	As of the date you file, the claim	ів: Спеск ан тат арріу	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt		aration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	Other. Specify Medical		
4.1	Northwestern Medical	Last 4 digits of account number		\$135.00
4	Nonpriority Creditor's Name			Ψ.σσ.σσ
	Professional Billing Dept 680 North Lake Shore Dr. Ste 100	When was the debt incurred?		
	Chicago, IL 60611 Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	to of the date you me, the claim	or oncon an man appry	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure		
	☐ Check if this claim is for a community	☐ Student loans		
	debt	Obligations arising out of a sepa		
	Is the claim subject to offset?	report as priority claims Debts to pension or profit-sharir		
	■ No			
	Yes	Other. Specify Medical		
4.1 5	Peoples Energy	Last 4 digits of account number	2618	\$55.00
	Nonpriority Creditor's Name	_	One and CAEIAE Look Active	
	200 East Randolph Chicago, IL 60601	When was the debt incurred?	Opened 6/15/15 Last Active 3/22/16	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separe report as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharir	ng plans, and other similar debts	
	☐ Yes	■ Other Specify Services		
	**	- Outon Opcomy		

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4.1 Progressive Direct	Last 4 digits of account numbe	er	\$76.00			
Nonpriority Creditor's Name PO Box 31260	When was the debt incurred?					
Tampa, FL 33631 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	As of the date you file, the claim is: Check all that apply				
Debtor 1 only	☐ Contingent					
Debtor 2 only	☐ Unliquidated					
Debtor 1 and Debtor 2 only	☐ Disputed					
☐ At least one of the debtors and another	Type of NONPRIORITY unsecu	red claim:				
☐ Check if this claim is for a community	Student loans					
debt Is the claim subject to offset?	_	paration agreement or divorce that you did not				
No	<u>-</u> ' ' '	ring plans, and other similar debts				
Yes	Other. Specify Services	g plane, and onle on mar above				
4.1 Sprint Corp.	Last 4 digits of account numbe	r 1452	\$950.00			
Nonpriority Creditor's Name						
Attn: Bankruptcy Dept. PO Box 7949	When was the debt incurred?	2015 - 2016				
Overland Park, KS 66207-0949 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	n is: Check all that apply				
Debtor 1 only	☐ Contingent					
Debtor 2 only	☐ Unliquidated					
☐ Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:					
☐ At least one of the debtors and another						
☐ Check if this claim is for a community	☐ Student loans	☐ Student loans				
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
■ No	☐ Debts to pension or profit-sha	☐ Debts to pension or profit-sharing plans, and other similar debts				
☐ Yes	Other. Specify Collection	ns				
Part 3: List Others to Be Notified About a De	ebt That You Already Listed					
5. Use this page only if you have others to be notified is trying to collect from you for a debt you owe to s have more than one creditor for any of the debts the notified for any debts in Parts 1 or 2, do not fill out	omeone else, list the original creditor at you listed in Parts 1 or 2, list the ac or submit this page.	in Parts 1 or 2, then list the collection agency iditional creditors here. If you do not have ad	here. Similarly, if you			
Name and Address ACI	On which entry in Part 1 or Part 2 did y Line 4.4 of (<i>Check one</i>):	•				
2420 Sweet Home Road	Line 4.4 of (Check one).	☐ Part 1: Creditors with Priority Unsecured Clai ☐ Part 2: Creditors with Nonpriority Unsecured				
Suite 150 Amherst, NY 14228-2244		Part 2: Creditors with Nonpriority Unsecured	Claims			
•	Last 4 digits of account number					
Name and Address	On which entry in Part 1 or Part 2 did y	ou list the original creditor?				
American Coradius International LLC		☐ Part 1: Creditors with Priority Unsecured Clai Part 2: Creditors with Nonpriority Unsecured				
2420 Sweet Home Road Suite 150		Part 2: Creditors with Nonpriority Unsecured	Ciaims			
Amherst, NY 14228-2244	Last 4 digits of account number					
Name and Address	On which entry in Part 4 or Part 9 did :	ou list the original gradites?				
Name and Address Bill Me Later	On which entry in Part 1 or Part 2 did y Line 4.9 of (<i>Check one</i>):	ou list the original creditor? \square Part 1: Creditors with Priority Unsecured Clai	ms			
Correspondence	: (::::::	Part 2: Creditors with Nonpriority Unsecured				
PO Box 2394		. are 2. Groundle with Hompholity Officecured				
Omaha, NE 68103-2394	Last 4 digits of account number					

Debtor 1 Cathryn A. Johnson

Debtor 1 Cathryn A. Johnson		Case number (if know)	
Name and Address Bill Me Later PO Box 105658 Atlanta, GA 30348	On which entry in Part 1 or Part 2 of Line 4.9 of (Check one): Last 4 digits of account number	did you list the original creditor? □ Part 1: Creditors with Priority Unsecured Claims □ Part 2: Creditors with Nonpriority Unsecured Claims	
Name and Address Bill MeLater PO Box 105658 Atlanta, GA 30348-5658	On which entry in Part 1 or Part 2 of Line 4.9 of (Check one): Last 4 digits of account number	did you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims	
Name and Address Capital Management Services Bankruptcy Department 698 1/2 S. Ogden Buffalo, NY 14206	On which entry in Part 1 or Part 2 of Line 4.2 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims	
	Last 4 digits of account number	1497	
Name and Address Citi PO Box 6500 Sioux Falls, SD 57117-6500	On which entry in Part 1 or Part 2 of Line 4.4 of (Check one): Last 4 digits of account number	did you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims	
Name and Address Citibank NA PO Box 769006 San Antonio, TX 78245	On which entry in Part 1 or Part 2 of Line 4.4 of (<i>Check one</i>): Last 4 digits of account number	did you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims	
Name and Address Comenity Bank Bankruptcy Department PO Box 182125 Columbus, OH 43218-2125	On which entry in Part 1 or Part 2 of Line 4.4 of (Check one):	did you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims	
	Last 4 digits of account number		
Name and Address Convergent 800 Sw 39th St Renton, WA 98057	On which entry in Part 1 or Part 2 or Line 4.17 of (<i>Check one</i>):	did you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims	
,	Last 4 digits of account number		
Name and Address GECRB/PYPL PO Box 965005 Orlando, FL 32896-5005	On which entry in Part 1 or Part 2 of Line 4.9 of (Check one): Last 4 digits of account number	did you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims	
Name and Address Gemb/Paypal Bankruptcy Department PO Box 103104 Roswell, GA 30076	On which entry in Part 1 or Part 2 of Line 4.9 of (<i>Check one</i>): Last 4 digits of account number	did you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims	
Name and Address Nw Collector 3601 Algonquin Rd. Rolling Meadow, IL 60008	On which entry in Part 1 or Part 2 of Line 4.11 of (Check one): Last 4 digits of account number	did you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims	
Name and Address SYNCB/Pay Pal ExtraSMC PO Box 965005 Orlando, FL 32896-5005	On which entry in Part 1 or Part 2 of Line 4.9 of (Check one): Last 4 digits of account number	did you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims	

Debtor 1 Cathryn A. Johnson

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Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				•	Total Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total claims					
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	1,979.65
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	1,979.65
					Total Claim
	6f.	Student loans	6f.	\$	32,647.00
Total claims					
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	28,041.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	60,688.00

Page 29 of 56 Document Fill in this information to identify your case: Debtor 1 Cathryn A. Johnson First Name Middle Name Last Name Debtor 2 First Name Middle Name (Spouse if, filing) Last Name NORTHERN DISTRICT OF ILLINOIS United States Bankruptcy Court for the: Case number (if known) ☐ Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

2.1 Name Number Street	
Number Street	
Number Street	
City State ZIP Code	
2.2	
Name	
Number Street	
City State ZIP Code	
2.3	
Name	
Number Street	
City State ZIP Code	
2.4	
Name	
Number Street	
City State ZIP Code	
2.5	
Name	
Number Street	
City State ZIP Code	

	Case 10-19720	Doc 1 Thea 00/1 Docume		oo/10/10 09.39.43 of 56	6/16/16 9:38AM
Fill in this	information to identify your				
Debtor 1	Cathryn A. Johns	son			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filio	ng) First Name	Middle Name	Last Name		
	-				
United Sta	tes Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case num	ber				
(if known)					☐ Check if this is an
					amended filing
Officia	l Form 106H				
		la la taura			
scned	lule H: Your Cod	eptors			12/15
1. Do ■ No	you have any codebtors? (If	you are filing a joint case,	do not list either spouse	as a codebtor.	
☐ Yes	S				
	hin the last 8 years, have you a, California, Idaho, Louisiana				tes and territories include
	Go to line 3. s. Did your spouse, former spo	use, or legal equivalent live	e with you at the time?		
in line Form out Co	e 2 again as a codebtor only 106D), Schedule E/F (Officia olumn 2.	if that person is a guaran	ntor or cosigner. Make	sure you have listed the cr 16G). Use Schedule D, Sch	th you. List the person shown editor on Schedule D (Official edule E/F, or Schedule G to fil
	Column 1: Your codebtor Name, Number, Street, City, State and Z	IP Code		Column 2: The credito Check all schedules the	r to whom you owe the debt apply:
3.1	Name			_ Schedule D, line _	
	Hamo			☐ Schedule E/F, line☐ Schedule G. line	
_				Scriedule G, line _	
	Number Street City	State	ZIP Code		
3.2				☐ Schedule D, line	
	Name			Schedule E/F, line	
				☐ Schedule G, line _	
-	Number Street			_	
	City	State	ZIP Code		

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Fill	in this information to	identify your ca	ase:				
Deb	otor 1	Cathryn A. J	ohnson				
	otor 2 use, if filing)						
Uni	ted States Bankrupto	cy Court for the	: NORTHERN DISTRIC	CT OF ILLINOIS			
	se number own)						apter
O	fficial Form	<u> 1061</u>			MM / DD/ Y	<u>'YYY</u>	
S	chedule I: \	our Inc	ome				12/15
supp spor attac	olying correct infor use. If you are sepa ch a separate shee	mation. If you arated and you	are married and not filir r spouse is not filing wi	ple are filing together (Debtor 1 and jointly, and your spouse is live the you, do not include informational pages, write your name and	ing with you, incl on about your spo	ude information about you ouse. If more space is nee	ur eded,
1.	Fill in your emplo	• •		Debtor 1	Debtor 2	or non-filing spouse	
	If you have more than one job,		Employment status	■ Employed	☐ Emplo	☐ Employed	
	attach a separate prinformation about a	•		☐ Not employed	☐ Not e	mployed	
	employers.	Occupation		Staff Accountant			
	Include part-time, s self-employed wor	· ·	Employer's name	Lake Forest Academy			
	Occupation may in or homemaker, if it		Employer's address	1500 W. Kennedy Rd. Lake Forest, IL 60045			
			How long employed the	here? <u>1/16</u>			_
Par	t 2: Give Deta	ails About Mor	thly Income				
spou	ise unless you are s	eparated.		you have nothing to report for any l			Ū
nore	e space, attach a se	parate sheet to	this form.	·		,	
					For Debtor 1	For Debtor 2 or non-filing spouse	
2.			ry, and commissions (be		4,862.00	\$ N/A	

deductions). If not paid monthly, calculate what the monthly wage would be.

Estimate and list monthly overtime pay.

Calculate gross Income. Add line 2 + line 3.

2.	\$_	4,862.00	\$	N/A
3.	+\$_	0.00	+\$	N/A
4.	\$_	4,862.00	\$	N/A

Deb	or 1 _	Cathryn A. Johnson	_	Case n	iumber (<i>if known</i>)				
				For I	Debtor 1	For	Debtor 2 or		
							-filing spouse		
	Copy	line 4 here	4.	\$	4,862.00	\$	N/A		
5.	List a	all payroll deductions:							
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	1,096.00	\$	N/A		
	5b.	Mandatory contributions for retirement plans	5b.	\$	0.00	\$	N/A	•	
	5c.	Voluntary contributions for retirement plans	5c.	\$	217.00	\$	N/A	-	
	5d.	Required repayments of retirement fund loans	5d.	\$	0.00	\$	N/A	•	
	5e.	Insurance	5e.	\$	57.00	\$	N/A	-	
	5f.	Domestic support obligations	5f.	\$	0.00	\$	N/A		
	5g.	Union dues	5g.	\$	0.00	\$	N/A		
	5h.	Other deductions. Specify: GROUP TERM LIFE CALCULATED	5h.+	\$		+ \$	N/A	-	
6.		the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	1,398.00	\$	N/A		
7.		ulate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	3,464.00	\$	N/A		
8.	List a 8a.	All other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total							
		monthly net income.	8a.	\$	0.00	\$	N/A		
	8b.	Interest and dividends	8b.	\$	0.00	\$	N/A		
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive	t					•	
		Include alimony, spousal support, child support, maintenance, divorce	90	\$	0.00	æ	NI/A		
	8d.	settlement, and property settlement. Unemployment compensation	8c. 8d.	\$ 	0.00	\$	N/A N/A		
	8e.	Social Security	8e.	\$ 	0.00	\$ 	N/A		
	8f.	Other government assistance that you regularly receive	00.	Ψ	0.00	Ψ	IVA	=	
		Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	e 8f.	\$	0.00	\$	N/A		
	8g.	Pension or retirement income	— 8g.	\$	0.00	\$	N/A		
	8h.	Other monthly income. Specify:	8h.+	\$		+ \$	N/A		
		· · · · ·				i —		T	
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	0.00	\$_	N/A	<u>\</u>	
10.	Calc	ulate monthly income. Add line 7 + line 9.	10. \$	3	,464.00 + \$		N/A = \$	3,464.00	
		he entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	L'-		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			5,101100	
11.	. State all other regular contributions to the expenses that you list in <i>Schedule J</i> . Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in <i>Schedule J</i> . Specify: 11. +\$ 0.00								
12.		the amount in the last column of line 10 to the amount in line 11. The rest that amount on the Summary of Schedules and Statistical Summary of Certales					12. \$	3,464.00	
							Combin monthly	ned y income	
13.	Do y	ou expect an increase or decrease within the year after you file this form	1?				•	-	
		No.							
		Yes. Explain:							

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Fill	in this information to identify your case:							
Deb	tor 1 Cathryn A. Johnson		Ch	eck if this is:				
Dob	tor 2			An amended filing	wing postpetition chapter			
	ouse, if filing)				the following date:			
Unite	ed States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLIN	OIS	MM / DD / YYYY					
Case	e number							
(If kr	nown)							
Of	ficial Form 106J							
Sc	chedule J: Your Expenses				12/15			
Be a	as complete and accurate as possible. If two married people an ormation. If more space is needed, attach another sheet to this onber (if known). Answer every question.							
Part								
1.	Is this a joint case?							
	■ No. Go to line 2. □ Yes. Does Debtor 2 live in a separate household?							
	☐ No☐ Yes. Debtor 2 must file Official Form 106J-2, <i>Expenses</i>	s for Separate House	hold of De	ebtor 2.				
2.	Do you have dependents? ☐ No							
	Do not list Debtor 1 and Debtor 2. Fill out this information for each dependent	Dependent's relation		Dependent's age	Does dependent live with you?			
	Do not state the				□ No			
	dependents names.	Daughter		18	■ Yes			
					□ No			
					☐ Yes			
					□ No			
					Yes			
					□ No □ Yes			
3.	Do your expenses include expenses of people other than yourself and your dependents? ■ No Yes	-			☐ Tes			
exp	Estimate Your Ongoing Monthly Expenses imate your expenses as of your bankruptcy filing date unless yenses as of a date after the bankruptcy is filed. If this is a supplicable date.							
the	ude expenses paid for with non-cash government assistance invalue of such assistance and have included it on <i>Schedule I:</i> Yicial Form 106I.)			Your exp	enses			
4.	The rental or home ownership expenses for your residence. I payments and any rent for the ground or lot.	nclude first mortgage	4.	\$	1,305.00			
	If not included in line 4:							
	4a. Real estate taxes		4a.	\$	0.00			
	4b. Property, homeowner's, or renter's insurance		4b.	\$	92.00			
	4c. Home maintenance, repair, and upkeep expenses		4c.	·	50.00			
	4d. Homeowner's association or condominium dues		4d.	\$	199.00			

5. \$

0.00

Additional mortgage payments for your residence, such as home equity loans

Debtor 1		Cathryn A. Johnson			Case number (if known)				
6.	Utilit	ies:							
-	6a.		heat, natural gas	6a.	\$	95.00			
	6b.	•	ver, garbage collection	6b.	\$	60.00			
	6c.		e, cell phone, Internet, satellite, and cable services	6c.	· · · · · · · · · · · · · · · · · · ·	415.00			
	6d.	Other. Spe	· · · · · · · · · · · · · · · · · · ·	6d.	\$	0.00			
7.	Food		ekeeping supplies	7.	· <u> </u>	400.00			
8.			hildren's education costs	8.	·	0.00			
9.			ry, and dry cleaning	9.	·	50.00			
		-	roducts and services	10.	· <u> </u>	50.00			
11.		-	ntal expenses	11.	·	54.00			
			Include gas, maintenance, bus or train fare.		*				
			ar payments.	12.	\$	200.00			
13.	Ente	rtainment,	clubs, recreation, newspapers, magazines, and bo	oks 13.	\$	0.00			
14.	Char	ritable cont	ributions and religious donations	14.	\$	0.00			
15.	Insu	rance.	-						
			surance deducted from your pay or included in lines						
	15a.	Life insura	nce	15a.		0.00			
	15b.	Health ins	urance	15b.	\$	0.00			
	15c.	Vehicle ins	surance	15c.	\$	167.00			
	15d.	Other insu	rance. Specify:	15d.	\$	0.00			
16.			clude taxes deducted from your pay or included in lin	es 4 or 20.					
	Spec	·		16.	\$	0.00			
17.			ease payments:		_				
			ents for Vehicle 1	17a.	· 	235.00			
			ents for Vehicle 2	17b.	·	0.00			
		Other. Spe		17c.		0.00			
		Other. Spe	•	17d.	\$	0.00			
18.			of alimony, maintenance, and support that you di		\$	0.00			
10			your pay on line 5, Schedule I, Your Income (Offic	ai i oi iii 1001 <i>)</i> .	\$				
19.			s you make to support others who do not live with		Φ	0.00			
20	Spec	·	erty expenses not included in lines 4 or 5 of this for	19.	our Incomo				
20.			s on other property	20a.		0.00			
		Real estate		20b.		0.00			
			nomeowner's, or renter's insurance	20c.	·	0.00			
			ice, repair, and upkeep expenses	20d. 20d.	· <u> </u>	0.00			
			er's association or condominium dues	20d. 20e.	·				
24					·	0.00			
21.	Otne	er: Specify:	Auto Maintenance		+\$	92.00			
22.	Calc	ulate your r	monthly expenses						
	22a.	Add lines 4	through 21.		\$	3,464.00			
	22b.	Copy line 22	2 (monthly expenses for Debtor 2), if any, from Officia	l Form 106J-2	\$	<u> </u>			
	22c.	Add line 22a	a and 22b. The result is your monthly expenses.		\$	3,464.00			
			• • • •			3,404.00			
23.			monthly net income.						
			12 (your combined monthly income) from Schedule I.	23a.	*	3,464.00			
	23b.	Copy your	monthly expenses from line 22c above.	23b.	-\$	3,464.00			
	23c.		our monthly expenses from your monthly income.	220	\$	0.00			
		The result	is your monthly net income.	23c.	Ψ	0.00			
2/	Do 1	ou evnect c	an increase or decrease in your expenses within t	ne vear after you file this	s form?				
4 .			ou expect to finish paying for your car loan within the year or o			e or decrease because of a			
			terms of your mortgage?	. ,	,,				
	■ N	0.							
	□ Y		Explain here:						
	_ ,,	· · · · · · · · · · · · · · · · · · ·							

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Fill in this inform	nation to identify your	case:			
Debtor 1	Cathryn A. Johns	on			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bar	nkruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number					
(if known)					Check if this is an amended filing
You must file this obtaining money	s form whenever you fi	n connection with a bank	or amended schedules	. Making a false state	ment, concealing property, or 0, or imprisonment for up to 20
Sign	n Below				
Did you pay	or agree to pay some	one who is NOT an attorr	ney to help you fill out b	pankruptcy forms?	
■ No					
☐ Yes. N	lame of person				rruptcy Petition Preparer's Notice, and Signature (Official Form 119)
	ty of perjury, I declare true and correct.	that I have read the sumr	mary and schedules file	ed with this declaratio	n and
X /s/ Cath	nryn A. Johnson		X		
	n A. Johnson e of Debtor 1		Signature of	Debtor 2	

Date

Date June 16, 2016

Fil	l in this inforr	nation to identify you	ır case:				
De	btor 1	Cathryn A. Joh	nson				
		First Name	Middle Name	Last Name	_		
1 -	btor 2 ouse if, filing)	First Name	Middle Name	Last Name			
Un	ited States Ba	inkruptcy Court for the	NORTHERN DISTRICT	OF ILLINOIS			
		, .,					
1	se number _ nown)						heck if this is an mended filing
St		of Financial		iduals Filing for I			4/1
		nore space is needed n). Answer every que		o this form. On the top of a	ny additional page	s, write you	r name and case
Pa	rt 1: Give I	Details About Your M	arital Status and Where Yo	ou Lived Before			
1.	What is you	r current marital stat	us?				
	☐ Married ■ Not ma						
2.	During the I	ast 3 years, have you	ı lived anywhere other tha	n where you live now?			
		st all of the places you	lived in the last 3 years. Do Dates Debtor lived there	not include where you live no Debtor 2 Prior A			Dates Debtor 2
	41322 N. S Antioch, I	Suraya Dr. L 60002-2102	From-To: 6/12 To 6/1	Same as Debto	1		Same as Debtor 1 From-To:
	25473 Hill Antioch, I		From-To: 6/14 To 6/1	☐ Same as Debto	1		Same as Debtor 1 From-To:
3. stat	es and territor	<i>ies</i> include Arizona, Ca		egal equivalent in a commu levada, New Mexico, Puerto Official Form 106H).			
Pa	rt 2 Expla	in the Sources of Yo	ur Income				
4.	Fill in the total	al amount of income ye	ou received from all jobs and	ing a business during this d all businesses, including pa ive together, list it only once to	t-time activities.	evious caler	dar years?
	□ No						
	Yes. Fil	I in the details.					
			Debtor 1		Debtor 2		
			Sources of income Check all that apply.	Gross income (before deductions and	Sources of inc		Gross income (before deductions

exclusions)

and exclusions)

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Case number (if known) Document Debtor 1 Cathryn A. Johnson

				Dobtor 1		Dobtor 2	
				Debtor 1	Crean income	Debtor 2	Creas income
				Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of incon Check all that app	
	om January e date you f		nt year until nkruptcy:	■ Wages, commissions, bonuses, tips	\$23,639.00	☐ Wages, commi bonuses, tips	ssions,
				☐ Operating a business		☐ Operating a bu	siness
	or last calend anuary 1 to		31, 2015)	■ Wages, commissions, bonuses, tips	\$53,520.00	☐ Wages, commi bonuses, tips	ssions,
				☐ Operating a business		☐ Operating a bu	siness
	r the calenc			■ Wages, commissions, bonuses, tips	\$207,010.00	☐ Wages, commi bonuses, tips	ssions,
				☐ Operating a business		☐ Operating a bu	siness
	winnings. I	f you are fili	ng a joint cas	e and you have income that y	you received together, list it o	only once under Debt	
				Debtor 1		Debtor 2	
				Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of incon Describe below.	ne Gross income (before deductions and exclusions)
	om January e date you f		nt year until kruptcy:	Child Support	\$6,138.00		
Pa 6.	-	Debtor 1's Neither Deindividual p Individual p During the No. Yes	or Debtor 2' ebtor 1 nor D orimarily for a 90 days befo Go to line 7 List below e paid that cre not include	personal, family, or househo re you filed for bankruptcy, di ach creditor to whom you pai	r debts? Jamer debts. Consumer debtald purpose." Id you pay any creditor a total of \$6,425* or more not for domestic support oblights bankruptcy case.	al of \$6,425* or more? in one or more payme gations, such as child	ents and the total amount you support and alimony. Also, do
	■ Yes.	Debtor 1 c	or Debtor 2 o 90 days befo Go to line 7	r both have primarily consure you filed for bankruptcy, di	umer debts. id you pay any creditor a tota	al of \$600 or more?	
			include pay	ments for domestic support o	bligations, such as child sup	port and alimony. Als	o, do not include payments to an
	0	s Name and	attorney for	this bankruptcy case. Dates of payme	ent Total amount	Amount you	Was this payment for

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	Creditor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this pa	ayment for
	Syncb/Ashley Homestores Attn Bankruptcy dept. 950 Forrer Blvd. Kettering, OH 45420	February 24, 2016	\$2,200.00	\$0.00	☐ Mortgage ☐ Car ☐ Credit Cool ☐ Loan Re ☐ Suppliers ☐ Other	ard payment s or vendors
7.	Within 1 year before you filed for bankrupto Insiders include your relatives; any general pa of which you are an officer, director, person in a business you operate as a sole proprietor. 1' alimony.	rtners; relatives of any gen control, or owner of 20% o	eral partners; partners partners of their voting	erships of which yog g securities; and a	u are a generary ny managing a	al partner; corporations agent, including one for
	No No					
	Yes. List all payments to an insider. Insider's Name and Address	Dates of payment	Total amount	Amount you	Reason for	this payment
	insider 5 Name and Address	bates of payment	paid	still owe	Neason for	uns payment
8.	Within 1 year before you filed for bankruptoinsider? Include payments on debts guaranteed or cosi No Yes. List all payments to an insider		ments or transfer a	any property on a	ccount of a d	ebt that benefited an
	Insider's Name and Address	Dates of payment	Total amount	Amount you		this payment
			paid	still owe	Include cred	litor's name
Pai	t 4: Identify Legal Actions, Repossession	s, and Foreclosures				
9.	Within 1 year before you filed for bankrupto List all such matters, including personal injury modifications, and contract disputes. No					
	Yes. Fill in the details. Case title	Nature of the case	Court or agency		Status of th	10 C350
	Case number	Hataro or the case	oourt or agoing,		Otatao oi ti	.o
10.	Within 1 year before you filed for bankrupto Check all that apply and fill in the details below No. Go to line 11. Yes. Fill in the information below.	cy, was any of your prope	erty repossessed, f	oreclosed, garnis	hed, attache	d, seized, or levied?
	Creditor Name and Address	Describe the Property		Date		Value of the property
		Explain what happened	d			property
11.	Within 90 days before you filed for bankrup accounts or refuse to make a payment beca ■ No □ Yes. Fill in the details.		luding a bank or fir	nancial institution	, set off any a	amounts from your
	Creditor Name and Address	Describe the action the	creditor took	Date taken	action was	Amount
12.	Within 1 year before you filed for bankrupto court-appointed receiver, a custodian, or at No Yes		erty in the possess			efit of creditors, a
	55					

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Page 39 of 56 Case number (if known) 6/16/16 9:38AM Document Debtor 1 Cathryn A. Johnson Part 5: List Certain Gifts and Contributions 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 Describe the gifts Dates you gave Value the gifts per person Person to Whom You Gave the Gift and Address: 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? □ No Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total Describe what you contributed Dates you Value more than \$600 contributed Charity's Name Address (Number, Street, City, State and ZIP Code) **Moody Bible Institute** contribution 2015 \$1,560.00 820 N LaSalle Blvd Chicago, IL 60610 Willow Creek Community Church Cars contribution 2015 \$45.00 67 East Algonquin Road South Barrington, IL 60010 Part 6: List Certain Losses Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? No Yes. Fill in the details. Describe the property you lost and Describe any insurance coverage for the loss Date of your Value of property how the loss occurred loss lost Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Part 7: List Certain Payments or Transfers

16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition?

Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy.

☐ No

Yes. Fill in the details.

Person Who Was Paid Description and value of any property Date payment Amount of **Address** transferred or transfer was payment Email or website address made Person Who Made the Payment, if Not You David M. Siegel & Associates **Attorney Fees** 4/23/16 \$470.00 790 Chaddick Drive -6/1/16 Wheeling, IL 60090

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Page 40 of 56 Document Cathryn A. Johnson ase number (if known) Debtor 1 17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. Nο п Yes. Fill in the details. **Person Who Was Paid** Description and value of any property Date payment Amount of transferred Address or transfer was payment made Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. ☐ No Yes. Fill in the details. Person Who Received Transfer Description and value of Describe any property or Date transfer was **Address** property transferred payments received or debts made paid in exchange Person's relationship to you 2013 Subaru Outback 2016 unknown none Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) No Yes. Fill in the details. Name of trust Description and value of the property transferred **Date Transfer was** made Part 8: List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. No Yes. Fill in the details.

Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
unknown	XXXX-	☐ Checking ☐ Savings ☐ Money Market ☐ Brokerage ☐ Other IRA rolled over to new employer 403b plan	4/16	\$0.00

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Debtor 1 Cathryn A. Johnson

21.	Do you now have, or did you have within 1 ye cash, or other valuables?	ar before you filed for bankruptcy, ar	ny safe deposit box or other deposito	ory for securities,
	■ No			
	Yes. Fill in the details.			
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?
22.	Have you stored property in a storage unit or	place other than your home within 1	year before you filed for bankruptcy	?
	■ No □ Yes. Fill in the details.			
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?
Pai	rt 9: Identify Property You Hold or Control fo	or Someone Else		
23.	Do you hold or control any property that some for someone.	eone else owns? Include any proper	ty you borrowed from, are storing fo	r, or hold in trust
	■ No			
	☐ Yes. Fill in the details.			
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Value
Pai	rt 10: Give Details About Environmental Infor	mation		
1 21	ove betails About Environmental infor	mation		
For	the purpose of Part 10, the following definition	is apply:		
	Environmental law means any federal, state, of toxic substances, wastes, or material into the regulations controlling the cleanup of these s	air, land, soil, surface water, ground		
	Site means any location, facility, or property a to own, operate, or utilize it, including dispos	as defined under any environmental l	aw, whether you now own, operate,	or utilize it or used
	Hazardous material means anything an environment hazardous material, pollutant, contaminant, o	onmental law defines as a hazardous	waste, hazardous substance, toxic	substance,
Rep	port all notices, releases, and proceedings that		they occurred.	
24.	Has any governmental unit notified you that y	ou may be liable or potentially liable	under or in violation of an environm	ental law?
	■ No			
	Yes. Fill in the details.			
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice
25.	Have you notified any governmental unit of ar	,		
	■ No			
	Yes. Fill in the details.	Co	Facility and a second s	Data of watter
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice

Case 16-19720 Doc 1 Filed 06/16/16 Entered 06/16/16 09:59:43 Desc Main Page 42 of 56 Document ase number (*if known*) Debtor 1 Cathryn A. Johnson 26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. Yes. Fill in the details. **Case Title** Nature of the case Status of the Court or agency **Case Number** Name case Address (Number, Street, City, State and ZIP Code) Part 11: Give Details About Your Business or Connections to Any Business 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A member of a limited liability company (LLC) or limited liability partnership (LLP) ■ A partner in a partnership ☐ An officer, director, or managing executive of a corporation ☐ An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Describe the nature of the business **Employer Identification number Business Name Address** Do not include Social Security number or ITIN. (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No Yes. Fill in the details below. **Date Issued Address** (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Cathryn A. Johnson Cathryn A. Johnson Signature of Debtor 2 Signature of Debtor 1 Date June 16, 2016 **Date** Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?

☐ Yes. Name of Person

■ No □ Yes

. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

		Docu	ument	Page 43	of 56			6/16/16 9:38AN
Fill in this infor	mation to identify you	ır case:						
Debtor 1	Cathryn A. Joh	nson						
	First Name	Middle Name		Last Name				
Debtor 2 (Spouse if, filing)	First Name	Middle Name		Last Name		_		
United States Ba	ankruptcy Court for the	NORTHERN DIST	RICT OF IL	LINOIS		_		
Case number (if known)							☐ Check if this amended fil	
Official Fo		on for Indiv	iduals	Filing	Under Ch	apter 7	7	12/15
creditors have leasy you must file th	re claims secured by sed personal property is form with the court ever is earlier, unless	napter 7, you must fill your property, or y and the lease has no twithin 30 days after the court extends the	ot expired. you file you	r bankruptcy				
	eople are filing togetl nd date the form.	ner in a joint case, bot	h are equal	ly responsible	e for supplying co	rrect inform	ation. Both debto	ors must
	and accurate as possour name and case n	sible. If more space is umber (if known).	needed, at	ach a separat	e sheet to this for	rm. On the to	op of any additio	nal pages,
Part 1: List Y	our Creditors Who H	ave Secured Claims						
For any credit information be		Part 1 of Schedule D:	Creditors \	Who Have Cla	ims Secured by P	roperty (Offi	icial Form 106D),	fill in the
	editor and the propert	y that is collateral	What do y		do with the prope	rty that	Did you claim thas exempt on S	
Craditaria /	My Cinonolol						п.,	

Ally Financial ☐ Surrender the property. □ No name: ☐ Retain the property and redeem it. Yes Retain the property and enter into a Description of 2011 Mini Cooper Convertible Reaffirmation Agreement. **Ally Financial** property ☐ Retain the property and [explain]: Secured Lien \$12,000 securing debt: Creditor's **Guaranteed Rate/dovenm** □ No ☐ Surrender the property. name: ☐ Retain the property and redeem it. ☐ Retain the property and enter into a Yes Description of 1663 Station Park Dr. Grayslake, Reaffirmation Agreement. property IL 60030 Lake County Retain the property and [explain]: securing debt: Debtor will retain collateral and continue to make regular payments.

Part 2: List Your Unexpired Personal Property Leases

For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

Describe your unexpired personal property leases

Will the lease be assumed?

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

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Debtor 1 Cathryn A. Johnson	Case number (if known)
Lessor's name:	□ No
Description of leased Property:	☐ Yes
Lessor's name:	□ No
Description of leased Property:	☐ Yes
Lessor's name: Description of leased	□ No
Property:	☐ Yes
Lessor's name: Description of leased	□ No
Property:	☐ Yes
Lessor's name: Description of leased	□ No
Property:	☐ Yes
Lessor's name: Description of leased	□ No
Property:	☐ Yes
Lessor's name: Description of leased	□ No
Property:	☐ Yes
Part 3: Sign Below	
Under penalty of perjury, I declare that I have indicated my intention about any pr property that is subject to an unexpired lease.	roperty of my estate that secures a debt and any personal
X /s/ Cathryn A. Johnson X	
Cathryn A. Johnson Signature of Debtor 1	ure of Debtor 2
Date Date	

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation	
\$245	filing fee	
\$75	administrative fee	
+ \$15	trustee surcharge	
\$335	total fee	

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

\$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 16-19720 Doc 1 Filed 06/16/16 Entered 06/16/16 09:59:43 Desc Main Document Page 49 of 56

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Northern District of Illinois

In r	e Cathryn A. Jo	ohnson		Case No.		
	-		Debtor(s)	Chapter	7	
	DIS	SCLOSURE OF COM	MPENSATION OF ATTOR	RNEY FOR D	EBTOR(S)	
1.	compensation paid t	o me within one year before the	P. 2016(b), I certify that I am the attorn he filing of the petition in bankruptcy, lation of or in connection with the bank	or agreed to be pai	d to me, for services rea	ndered or to
					1,200.00	
	Prior to the filing	ng of this statement I have rec	ceived	\$	470.00	
	Balance Due			\$	730.00	
2.	The source of the co	ompensation paid to me was:				
	Debtor	☐ Other (specify):				
3.	The source of compo	ensation to be paid to me is:				
	Debtor	☐ Other (specify):				
4.	■ I have not agree	d to share the above-disclosed	d compensation with any other person	unless they are mer	mbers and associates of	my law firm.
			mpensation with a person or persons w the names of the people sharing in the			w firm. A
5.	In return for the abo	ove-disclosed fee, I have agree	ed to render legal service for all aspects	s of the bankruptcy	case, including:	
	 b. Preparation and a c. Representation of d. [Other provision Negotiation agreement 	filing of any petition, schedule of the debtor at the meeting of s as needed] ons with secured creditor	d rendering advice to the debtor in dete es, statement of affairs and plan which creditors and confirmation hearing, an rs to reduce to market value; exe eeded; preparation and filing of r goods.	may be required; ad any adjourned he	arings thereof; g; filing of reaffirmat	tion
6.	Represen		osed fee does not include the following iny dischargeability actions, judio oceeding.		ces (except in Chap	ter 13
			CERTIFICATION			
this	I certify that the fore bankruptcy proceeding		at of any agreement or arrangement for	payment to me for	representation of the de	ebtor(s) in
	June 16, 2016		/s/ David M. Siege	el		
	Date		David M. Siegel			_
			Signature of Attorne David M. Siegel &			
			790 Chaddick Driv Wheeling, IL 6009	ve		

(847) 520-8100 Name of law firm

Chapter 7 Bankruptcy Retainer Agreement

This agreement acknowledges that the undersigned individual(s) [Client(s)] hereby retains and employs the Law Firm of DAVID M. SIEGEL & ASSOCIATES [Attorney] for representation in a Chapter 7 bankruptcy case. In consideration for services rendered and to be rendered, the Client agrees to pay Attorney as follows:

- a) A FLAT FEE as specified in paragraph H will be required to file a bankruptcy petition for the Client and for representation of the Client through discharge. The fee includes all required court costs and filing fees, as well as compensation for Attorney's time and labor. The fee is immediate compensation for the firm's commitment to perform future services; the fee is property of the firm and may be deposited in the firm's operating or business account.
- b) Representation shall begin upon execution of this agreement and tender of the initial payment, and will continue until the end of the case. The fee includes the preparation, review, and revision of the bankruptcy petition, communications with the Client, representation and appearance at the §341 Meeting of Creditors and §2004 examinations as necessary, communication with the bankruptcy and United States trustees, communication with creditors, review and completion of reaffirmation agreements, and court appearances.
- c) The fee **does not** include representation in any adversarial proceedings. The Client and Attorney may enter in to an additional agreement to provide for representation in an adversarial proceeding. In the event that the case is converted to another Chapter, there may be an additional fee.
- d) Additional Fees:
 - A fee of \$250.00 shall be added in the event that Client misses the scheduled §341 Meeting of Creditors
 - A fee of \$100.00 shall be added to amend Schedules D, E, and F to include creditors who were
 not originally provided by the Client. The Client has the full responsibility to ensure that all
 creditors are listed.
 - A fee of \$25.00 shall be added for any non-sufficient/returned checks. Post-dated checks are not accepted and will be voided upon receipt.
 - A fee of \$820.00 shall be added to reopen a case and file the second credit counseling certificate if the Client fails to take the second credit counseling course and provide Attorney with the certificate in a timely fashion.
- e) The Client will be billed on any outstanding balance at the rate of \$100.00 every two weeks. Clients who fail to make payments as required will be assessed late fees in the amount of \$25.00 per billing period plus interest at the rate of 18% per year on any unpaid balance.
- f) No case shall be filed until all fees are paid in full.
- g) In the event that a Client pays the flat fee in full, and later elects to not proceed with the case, the Client is entitled to a refund of the court costs and filing fees only.

Important Bankruptcy Information

Debts that are Discharged

The Chapter 7 discharge order eliminates a Client's legal obligation to pay a debt that is discharged. Most, but not all, types of debts are discharged if the debt existed on the date the bankruptcy case was filed. (If this case was begun under a different Chapter of the Bankruptcy Code and converted to a Chapter 7, the discharge applies to debts owed when the bankruptcy case was converted.)

Debts that are Not Discharged

Some of the common types of debts which are not discharged in a Chapter 7 bankruptcy case are:

- a) Debts for most taxes;

H.

Date: 4/23/16

- -b) Debts that are in the nature of alimony, maintenance, or support;
- -c) Debts for student loans;
- d) Debts for most fines, penalties, forfeitures, or criminal restitution obligations;
- Debts for personal injuries or death caused by the Client's operation of a motor vehicle while intoxicated;
 - f) Some debts that are not properly listed by the Client;
 - g) Debts that the bankruptcy court specifically determines to be non-dischargeable;
- h) Debts for which the Client has given up the discharge protection by signing reaffirmation agreements in compliance with the Bankruptcy Code requirements for reaffirming debts.

The FLAT FEE for representation in this matter will be \$ /, 200 - 00.

Client acknowledge that he or she has read this agreement in its entirety, understands it fully, has had an

opportunity to ask questions regarding this agree	ement, is satisfied with it, and accepts it in its entirety.
Date: 4/23/16	Signed: Cathup a Three
	Print: CATHRYN A JOHNSON
Date:	Signed:
	Print:
/	

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United States Bankruptcy CourtNorthern District of Illinois

		Tior theri District of Hillors		
In re	Cathryn A. Johnson		Case No.	
		Debtor(s)	Chapter	7
	VE	RIFICATION OF CREDITOR M	ATRIX	
		Number of	Creditors:	34
	The above-named Debtor(s) (our) knowledge.	hereby verifies that the list of credite	ors is true and co	orrect to the best of my
Date:	June 16, 2016	/s/ Cathryn A. Johnson Cathryn A. Johnson Signature of Debtor		

ACI 2420 Sweet Home Road Suite 150 Amherst, NY 14228-2244

Ally Financial PO Box 380901 Bloomington, MN 55438

Ally Financial PO Box 130424 Roseville, MN 55113-0004

American Coradius International LLC 2420 Sweet Home Road Suite 150 Amherst, NY 14228-2244

Auto Club Insurance Association 1 Auto Club Drive Dearborn, MI 48126

Barclays Bank Delaware 125 S. West St. Wilmington, DE 19801

Bill Me Later Correspondence PO Box 2394 Omaha, NE 68103-2394

Bill Me Later PO Box 105658 Atlanta, GA 30348

Bill MeLater PO Box 105658 Atlanta, GA 30348-5658

Capital Management Services Bankruptcy Department 698 1/2 S. Ogden Buffalo, NY 14206 Chase Card Po Box 15298 Wilmington, DE 19850

Citi Attn: Bankruptcy Department PO Box 6241 Sioux Falls, SD 57717

Citi PO Box 6500 Sioux Falls, SD 57117-6500

Citibank NA PO Box 769006 San Antonio, TX 78245

Comenity Bank
Bankruptcy Department
PO Box 182125
Columbus, OH 43218-2125

Convergent 800 Sw 39th St Renton, WA 98057

Dept Of Ed/navient Po Box 9635 Wilkes Barre, PA 18773

Discover Fin Svcs LLC Po Box 15316 Wilmington, DE 19850

GECRB/Paypal PO Box 981439 El Paso, TX 79998-1439

GECRB/PYPL PO Box 965005 Orlando, FL 32896-5005 Gemb/Paypal Bankruptcy Department PO Box 103104 Roswell, GA 30076

Guaranteed Rate/dovenm 1 Corporate Dr., Ste. 360 Lake Zurich, IL 60047

Guaranteed Rate/dovenm PO Box 54 Palatine, IL 60055-0054

IL Bone and Joint Institute 5057 Paysphere Circle Chicago, IL 60674

Internal Revenue Service Centralized Insolvency Operations P.O. Box 7346 Philadelphia, PA 19114-7346

Lake Zurich Police Phot Enforcement 200 Mohawk Trail Lake Zurich, IL 60047

Libertyville Sports Complex 1950 N Highway 45 Libertyville, IL 60048

Northwest Community Healthcare 28079 Network Place Chicago, IL 60673-1280

Northwestern Medical Professional Billing Dept 680 North Lake Shore Dr. Ste 100 Chicago, IL 60611

Nw Collector 3601 Algonquin Rd. Rolling Meadow, IL 60008 Peoples Energy 200 East Randolph Chicago, IL 60601

Progressive Direct PO Box 31260 Tampa, FL 33631

Sprint Corp.
Attn: Bankruptcy Dept.
PO Box 7949
Overland Park, KS 66207-0949

SYNCB/Pay Pal ExtraSMC PO Box 965005 Orlando, FL 32896-5005